Fax Cover Sheet

Date: October 12, 2010

To: Darin Mills

Phone: 202-777-3608

Fax#:   202-552-4545

From: Dwight Solomon (DOE/G5 Contractor)

Phone: 202-245-6563

Re: HRMS Account Request (TMS)

No. of Pages: 2 - including cover sheet

Hi Darin,

Attached is the HRMS Account Request form for TMS production access. As requested, please see Tom Erdelyi's signature.

Let us know if there is something else you require.

Dwight Solomon

HRMS Account Request
Version Date 05/20/2009 (Previous Versions Obsolete)
Fax completed form 303-969-5082 or Mail Stop D-2250

Scope of Authorization

The user has authorized access for administration of identified applications in the HRMS as described below. This authorization will be revoked on separation, retirement, reassignment of duties, change of organization, or when determined to be in the best interest of the Government.

USER: First Name _Dwight_   Middle Initial _L_ Last Name _Solomon_

Employment: ☐ Federal Employee ☒ Contractor   Organization Code _____

E-mail Address _Dwight.Solomon@Ed.Gov_ Telephone (_202_) _245_ - _6563_   Ext. _____

Access Request: ☒ Add ☐ Delete ☐ Change _Circle_: WTTS TMS   _current_ User ID_____

Other (describe) _____

System Request: ☐ WTTS ☒ TMS

Reason for Request _____

Admin Role Requested _____

Role Request Checklist is provided on the following page; unique role requests are permitted but must be clearly described above. Multiple roles can be assigned. In all cases provide an existing RACF user id if applicable.

Acknowledgment

I understand that I am authorized to access HRMS as identified above and that access for any purpose beyond the Scope of Authorization is a violation of Federal law (18 U.S.C §1030, et. al.). My password is known only to me, compliant with DOI and NBC policy; and I may be held responsible for any and all actions affecting the systems resulting from the use of my user id and password.

User Signature _Dwight L Solomon_   Date _10/8/10_

Supervisor's or Other Responsible Official's Statement:
I acknowledge that the above individual is to have the Access Request following the receipt of this HRMS Account Request Form.

_____   _10/11/10_
Authorized Signature   Date

_____   _____
SPOC Signature   Date

HRMS Administrator Use Only	
Date Received:	DSAF Submitted Date:
New User Notification Date:	

Questions call Jennifer Butts 303-969-7218 or e-mail Jennifer_A_Butts@nbc.gov or
George Capan 303-969-7496 or email George_G_Capan@nbc.gov
Fax 303-969-5082